SECRETARY OF STATE DIVISION OF CORPORATIONS

98 JUL -8 PM 3: 20

## DOCUMENT # A27259

1. Name of Limited Partnership

Weston Realty Sales Limited Partnership

DO NOT WRITE IN THIS SPACE

2. Mailing Address	3. Principal Office Address			4. Date Formed or Registered	4. Date Formed or Registered 10 Do Business in Florida 10/21/1009			
900 North Michigan Avenue		900 North Michigan Avenue				10/21/1990		
Suite, Apt. #, etc  City & State		Suite, Apt #, otc.  City & State		5. FEI Number		Applied For		
				58-1814288		Not Applicable		
Chicago, Illinois		Chicago, Illinois			6.	50.76 Ad	ditional Fee required	
Zip	Country	Zip Country			CERTIFICATE OF STATUS DESIRED for a Certificate of Status			
60611	USA	60611	USA	4	7. State or Country of Formation Delaware			
8aCapital Contributions as Shown				7. State or Country of Formation Delaware				
1 * On Record		FEES:1.) Filling Fee(s): Computed at a rate of \$7 per \$1, \$437.50, for <u>each year due</u> this office.  2.) Supplemental Fee(s): \$88.75 for <u>each year due</u>			r \$1,000 on amount entered in 8b, with a minimu	um filing fee of \$52.5	30 and a maximum of	
\$1,000.00					ue this office, beginning with 1992 calendar year.			
8b. Amount of Capital Contributions in		3.) Penalty Fee(s): \$500 penalty fee for each year report form is delinquent.						
FLORIDA to date \$10.00		Note: If the amount entered in 8b is greater than amount entered in 8a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee.						
9. 1	legistered Agent			10. If changed, new registered agent/office				
C T Corporat		i	Name					
1200 South P			D. Box Number Is Not Acceptable)					
Plantation,								
riantation,	Suite, Apt. #. etc.							
•				City				
FL /////								
10a. Pursuant to the provisions of sections 620 1051 and 620 192. Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the provisions of sections 620 1051 and 620 192. Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement								
for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s), I hereby accept the appointment of registered agent. Lam temiliar with, and accept the obligations of section 620 192, Florida Statutes.								
N = 20 1 1								
SIGNATURE (Registered Age	nt Accepting Appointment)		your.	m Ha	DATE			
A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY								
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.								
11. Names of General Partner(s)  Address of Each General Partner(s)  (Do NOT Use Post Office Box No.						Registration ument Number		
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Weston Pools	y Sales, Inc.	000 N W	1				[	
Meston Veate	y sales, inc.	900 N. Mic	nigan A	ve.   C	Chicago, IL 60611	F920000	00428	
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DELICATEMENT 1998								
William Cyrs							}!	
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Note: General no	ortnore MAV NOT b	o changed on t	hia faum.	an amanda	want much ha filed to abou			

General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. Frelease the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under eath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes

Typed or Prinled Name of General Partner Signing Form

Weston Realty Sales, Inc.

Asst. Secretary DATE 05/05/1998

\_ Telephone Number \_\_(312) 915-1969